

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18493

FILED
Mar 09, 2007
Secretary of State

Entity Name: MAINE WAY VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

ROBERT CONORER
1408 SAN CRISTOBAL AVENUE DEEP CREEK
PT. CHARLOTTE, FL 339836247

New Principal Place of Business:

MAINE WAY VILLAS
1408 SAN CRISTOBAL AVENUE DEEP CREEK
PT. CHARLOTTE, FL 339836247

Current Mailing Address:

ROBERT CONORER
1408 SAN CRISTOBAL AVENUE DEEP CREEK
PT. CHARLOTTE, FL 339836247

New Mailing Address:

C/O 1ST CHOICE CONDO MANAGEMENT
PO BOX 7555
NORTH PORT, FL 34287

FEI Number: 59-2750290

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONOVER, ROBERT
1408 SAN CRISTOBAL AVE
PT CHARLOTTE, FL 33983 US

Name and Address of New Registered Agent:

BINDER, BRENDA S
1485 FITZGERALD ROAD
NORTH PORT, FL 34288 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: BRENDA S. BINDER

03/09/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: WILLIAMSON, GARY
Address: 1408 SAN CRISTOBAL AVE.
City-St-Zip: PORT CHARLOTTE, FL 33983

Title: PD () Delete
Name: CONOVER, ROBERT J
Address: 1408 SANCRISTOBAL AVE
City-St-Zip: PT CHARLOTTE, FL

Title: STD () Delete
Name: CULVER, DORIS S
Address: 1408 SAN CRISTOBAL AVE.
City-St-Zip: PT. CHARLOTTE, FL 33983

Title: D () Delete
Name: BOWDEN, GAIL,
Address: 1408 SAN CRISTOBAL AVE
City-St-Zip: PT. CHARLOTTE, FL

Title: D () Delete
Name: MOORE LAURA,
Address: 1408 SAN CRISTOBAL AVE
City-St-Zip: PORT CHARLOTTE, FL 33983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: WILLIAMSON, GARY
Address: 1408 SAN CRISTOBAL AVE. #5
City-St-Zip: PORT CHARLOTTE, FL 33983

Title: PD (X) Change () Addition
Name: CONOVER, ROBERT J
Address: 1408 SANCRISTOBAL AVE #10
City-St-Zip: PT CHARLOTTE, FL 33983

Title: STD (X) Change () Addition
Name: WILLIAMSON, KATHY
Address: 1408 SAN CRISTOBAL AVE. #5
City-St-Zip: PT. CHARLOTTE, FL 33983

Title: D (X) Change () Addition
Name: BOWDEN, GAIL
Address: 1408 SAN CRISTOBAL AVE #2
City-St-Zip: PT. CHARLOTTE, FL 33983

Title: D (X) Change () Addition
Name: MOORE, LAURA
Address: 1408 SAN CRISTOBAL AVE
City-St-Zip: PORT CHARLOTTE, FL 33983

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT J. CONOVER

P

03/09/2007

Electronic Signature of Signing Officer or Director

Date